

WORK YES NO
 CLASSIFY TO FILE NO. 50-6-32/4
 KEEP TO FILE NO.
 FILE BY RET. TO BRANCH
 DESTROY SIS. 11/1/67

CLASSIFIED MESSAGE TOTAL COPIES 30

| | | | |
|----------------------|--|-------------------------|----|
| SECRET | | REPRODUCTION PROHIBITED | |
| PERSON/UNIT NOTIFIED | | 1 | 2 |
| | | 3 | 4 |
| | | 5 | 6 |
| | | 7 | 8 |
| | | 9 | 10 |
| | | 11 | 12 |
| | | 13 | 14 |
| | | 15 | 16 |
| | | 17 | 18 |
| | | 19 | 20 |
| | | 21 | 22 |
| | | 23 | 24 |
| | | 25 | 26 |
| | | 27 | 28 |
| | | 29 | 30 |

843

ACTION ADVANCE COPY REVERSE SLIDES TUBES
 INFO RFD COPY

FILE 13, EUR 8, SAB, CICPS, FILM 2

SECRET 151600Z CITE OTTAWA 4138

MEXICO CITY INFO DIRECTOR

REDCOAT

REF A MEXICO CITY 0121

REF B MEXICO CITY 9919

(IN 88244)

(IN 77928)

07-A ABSTRACT INDEX WHT//
 15 FEB 67 01388

LOCAL ENERGY REP PASSED REF INFO RE LOWRY TO SMABOVE 13 FEB 67.

SECRET

BT

SECRET

LIFENT

50-6-32/4
15 FEB 67

41
50-6-344

| | | | | |
|---|--|--|-------------------------|----------------|
| INDEX <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | CLASSIFY TO FILE NO. <u>SECRET</u> | CLASSIFIED MESSAGE | TOTAL COPIES | 41 50000087 |
| X-REF TO FILE NO. | FILE REC'D BY BRANCH | EXCLUSIVELY AUTOMATIC PRINT REPRODUCTION AND REPRODUCTION MAILED | REPRODUCTION PROHIBITED | |
| FILE REC'D BY BRANCH | DESTROY <input type="checkbox"/> SIG. <u>CANCELL</u> | PERSON/UNIT NOTIFIED | 1 | 3 |
| | | | 2 | 6 |
| | | | 3 | 7 |
| | | | 4 | 8 |
| ACTION | <u>DISSEM BY AIR</u> | ADVANCE COPY | UNIT | TIME |
| INFO | <u>UH-8</u> | <input checked="" type="checkbox"/> RID COPY <input type="checkbox"/> ISSUED <input type="checkbox"/> SLOTTED <input type="checkbox"/> TUBED | | |
| <u>FILE, LR, CIR, Z, EUR8 5A8, UH/COG8, CYAPS F1, FY/UNIT</u> | | | | |

SECRET 272155Z CITE MEXICO CITY 0121

DIRECTOR INFO OTTAWA

REDCOAT (IND 7928)

PEF: MEXICO CITY 9919 (PLS RELAY TO OTTAWA).

MEXI APR 14 1967 (DOC. MICRO SER. 33248)

| | | |
|----------|------|-------|
| AN | RP | UH/1 |
| PS | DESS | |
| ABSTRACT | X | INDEX |
| ABSTRACT | X | INDEX |

1. PER LIFEAT DON LOWRY AGAIN CALLED LEONOV 19 JAN IDENTIFYING HIMSELF AS FROM CANADA. LOWRY HAD BEEN UNABLE TO CONTACT [REDACTED] BUT LEONOV SAID HE COULD NOT HELP HIM AND THAT HE SHOULD KEEP TRYING.

✓ 2. LOCAL LNERGO HAS RECORD OF ONE DONALD ROBERT LOWRY, BORN 26 NOV 1914 OP 1915 IN WALKERVILLE OR WINDSOR, ONTARIO.

LOCAL LNERGO IS NOTIFYING THEIR REPRESENTATIVES IN [REDACTED] WASHINGTON AND OTTAWA TO SEE IF LOWRY STILL ON WANTED LIST [REDACTED]

3. STATION HAS LIONION PHOTO OF MAN [REDACTED]

[REDACTED] ON 9 JAN AND SHOWS SOME RESEMBLANCE TO VERY OLD LNERGO PHOTO OF DONALD ROBERT LOWRY. CAN POUCH PRINTS IF OTTAWA STATION WISHES.

4. SUBSTANCE OF THE ABOVE AND INFO IN PEF MAY BE PASSED TO SMAROVES, DISGUIISING SOURCE. REQUEST OTTAWA STATION COORDINATE ANY ACTION WITH LNERGO.

SECRET

SECRET

BT

MICROFILMED
MAR 7 1967
DOC. MICRO SER.

50-6-344
27 JAN 67

| | | | |
|-----------------|---|---|-------------------|
| DISPATCH | | CLASSIFICATION SECRET | PROCESSING ACTION |
| TO | Chief, SH Division | MARKED FOR INDEXING | |
| INFO | Chief of station, Mexico City | NO INDEXING REQUIRED | |
| FROM | Chief of station, Fort au Prince <i>filed</i> | ONLY QUALIFIED DESK CAN JUDGE INDEXING | |
| | | MICROFILE | |

DISPATCHCLASSIFICATION
SECRET

PROCESSING ACTION

MARKED FOR INDEXING

NO INDEXING REQUIRED
ONLY QUALIFIED DESA
CAN JUDGE INDEXING

MICROFILM

and []

| | | | |
|-----------------------------|----------------------------|---------------------------------------|--|
| TO Deputy Chief WH/C | INFO Chief, WH Division | FROM Chief of Station, Mexico City | SUBJECT TYPIC/LIFEAT/Transmittal of Traffic of Subject of [] |
| ACTION SCHEDULED REFERENCES | | | [] |

1. Attached as A are copies of traffic covering the Subject of [] for the period 1, 2, 4, and 7 June 1966. This traffic was provided Station Mexico by LIFEAT.
2. Attached as B are copies of traffic covering [] for the period 30 May - 12 June 1966. This traffic was also provided Station Mexico by LIFEAT.
3. Attachments are being forwarded KAPOK and under separate cover.

Willard C. Curtis
for Willard C. CURTIS

Attachments:
A & B a/s KAPOK u/s/c

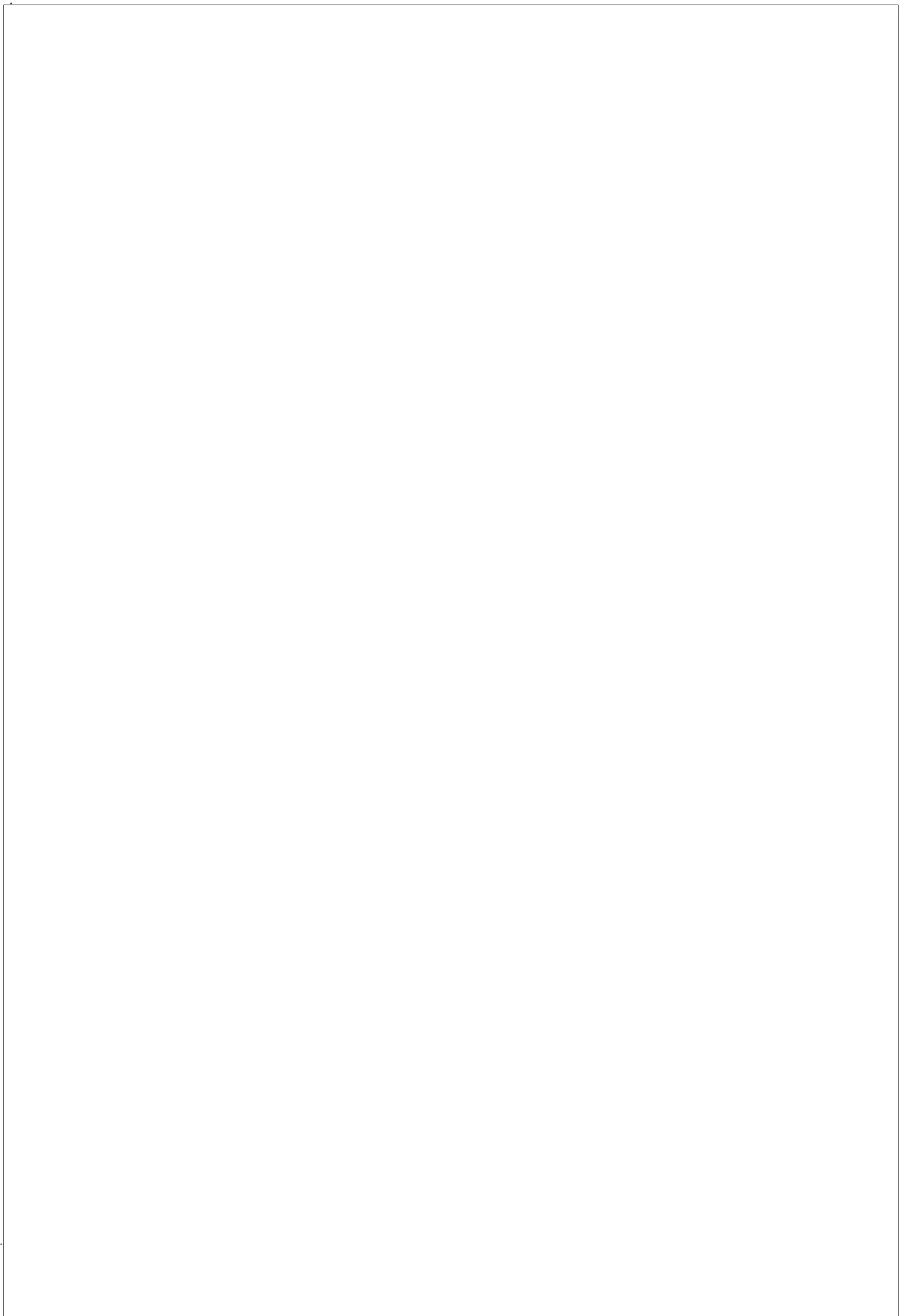
Distribution:
✓ 1 - DCNR/C w/atts u/s/c
1 - C/WHD w/o atts
4 - FILES

*LIFEAT
CB
DETERMINED*

| | | |
|---------------------|--|------------------------------|
| CROSS REFERENCE NO. | DISPATCH SYMBOL AND NUMBER HOMA-19211 | DATE 16 June 1966 |
| | TRANSMISSION | WCS FILE NUMBER 50-6-12/4 |
| | S E C R E T | [] |

21

| | | | |
|---|--------------|--------------------------------|--|
| DISPATCH | | CLASSIFICATION CONFIDENTIAL | PROCESSING ACTION |
| TO <i>CHIEF, 440</i> | FROM INFO | HAM | MAILED FOR INDEXING <input type="checkbox"/> NO INDEXING REQUIRED <input checked="" type="checkbox"/> ONLY QUALIFIED INDEXER <input type="checkbox"/> CAN ALSO INDEXING <input type="checkbox"/> INDEXED |
| FROM Chief of Station, Fort-Sainte-Croix | | | |





| DISPATCH | | CLASSIFICATION SECRET | PROCESSING ACTION | | | | | | |
|--|--|--|-------------------|------------------------------------|--|---------------------|--|--------------------------|---------------------------|
| TO | Chief of Station, Santo Domingo | | | | | | | | |
| INFO | XXXX | | | | | | | | |
| FROM | Chief, WH Division | | | | | | | | |
| SUBJECT | Chief of Station, Mexico City | | | | | | | | |
| ACTION REQUIRED REFERENCES | | MARKED FOR INDEXING | | | | | | | |
| o LIFEAT Coverage of [redacted] | | NO INDEXING REQUIRED | | | | | | | |
| | | ONLY QUALIFIED DESK CAN JUDGE INDEXING | | | | | | | |
| | | MICROFILM | | | | | | | |
| Mexico City | | | | | | | | | |
| <p>Attached for Addressees' information and retention are copies of the transcripts of the LIFEAT coverage of the [redacted] in Mexico City, reels 21 through 34 for the period 2 to 9 May 1966.</p> <p style="text-align: right;">for Willard C. CURTIS</p> <p><i>[Handwritten signature]</i></p> <p>Attachments: As stated above, b/w</p> <p>Distribution: 2 - COS, Santo Domingo, w/atts C - Chief, WHD, w/atts</p> <p><i>[Handwritten mark]</i></p> <p style="text-align: center;">CC COPY</p> <p style="text-align: right;">50-6 32/4</p> <table border="1"> <tr> <td>CROSS REFERENCE TO <i>1 att</i></td> <td>DISPATCH SYMBOL AND NUMBER HMDA-28843</td> <td>DATE 10 May 1966</td> </tr> <tr> <td></td> <td>CLASSIFICATION SECRET</td> <td>HQS FILE NUMBER 50-9-3</td> </tr> </table> | | | | CROSS REFERENCE TO <i>1 att</i> | DISPATCH SYMBOL AND NUMBER HMDA-28843 | DATE 10 May 1966 | | CLASSIFICATION SECRET | HQS FILE NUMBER 50-9-3 |
| CROSS REFERENCE TO <i>1 att</i> | DISPATCH SYMBOL AND NUMBER HMDA-28843 | DATE 10 May 1966 | | | | | | | |
| | CLASSIFICATION SECRET | HQS FILE NUMBER 50-9-3 | | | | | | | |

183-

14-00000

14-00000

| | | | |
|---|--|--|-------------------|
| DISPATCH | | CLASSIFICATION SECRET/KAPOK | PROCESSING ACTION |
| TO: DCWHD/C INFO: Chief, WH Division FROM: Chief of Station, Mexico City SUBJECT: TYPIC/AMROD/LIVEAT | | XX <small>BURNED FOR INDEXING</small> <small>NO INDEXING REQUIRED</small> <small>ONLY QUALIFIED DESK CAN MAKE INDEXING</small> <small>MICROFILM</small> | |
| ACTION REQUIRED REFERENCES | | | |
| Action Required: Pass to Thomas G. URQUHART Forwarded herewith is verbatim conversation between [redacted] and [redacted] on 20 November 1965. (Source: LIVEAT) | | | |
| <i>Willard C. CURTIS</i> Attachments: As stated - Herewith | | | |
| Distribution: 2 - DCWHD/C w/att (b/v) 1 - C/WHD w/o/att 3 - Files | | | |
| <small>CROSS REFERENCE TO</small> <small>DISPATCH SYMBOL</small> | | <small>DATE</small> <small>15 December 1965</small> | |
| <small>REGISTRATION</small> <small>SECRET/KAPOK</small> | | <small>HC 5 FILE NUMBER</small> <small>201 - 020481</small> | |

| | | | |
|-------------------------------------|--------------------------------------|---------------------------------|---|
| DISPATCH | | CLASSIFICATION SECRET | PROCESSING ACTION |
| TO | Chief, WH Division | | MARKED FOR INDEXING |
| INFO. | | XXY | NO INDEXING REQUIRED |
| FROM | Chief of Station, Mexico City | | ONLY QUALIFIED DESK CAN JUDGE INDEXING |
| SUBJECT | | | MICROFILM |
| ACTION REQUIRED - REFERENCES | | | |

1. Attached for Headquarters' information and retention are copies of the LIFEAT coverage on Subject, reel #269 through reel #272 for the period 2 through 14 July 1965 and reel #1 through reel #16 for the period 31 July through 16 August 1965.
2. This coverage was temporarily discontinued from 15 through 30 July because of technical difficulties with the instrument in the [redacted]

for
Willard C. CURTIS

Attachment:
As stated in paragraph 1

Distribution:
3 - Chief, WHD, w/att

*File
LIFEAT*

| | | |
|------------------|--|--------------------------------------|
| GSS REFERENCE TO | DISPATCH SYMBOL AND NUMBER IRPA-26,933 | DATE 19 August 1965 |
| | CLASSIFICATION SECRET | HQS FILE NUMBER 201-745927 |

| DISPATCH | | CLASSIFICATION SECRET | PROCESSING ACTION |
|---|--|-------------------------------------|--|
| TO | Chief, EED | | MARKED FOR INDEXING |
| INFO | Chief, WHD | <input checked="" type="checkbox"/> | NO INDEXING REQUIRED |
| FROM | Chief of Station, Mexico City | | ONLY QUALIFIED DESK CAN JUDGE INDEXING |
| SUBJECT | DNILET/LIFEAT/Operational Transliteration of LIFEAT Tapes and Transcripts | | MICROFILM |
| ACTION REQUIRED - REFERENCES | | | |
| <p>1. Forwarded herewith for translation of the [] portions are the following LIFEAT tapes: 7, 9, 10, 11, 12 & 14. Also forwarded are the following transcripts: 7, 8, 9, 10, 11, 12 & 14.</p> <p>2. Because of the DMSAUCE/1 flap, the [] transcripts of the LIFEAT tapes will continue thru the end of this week (10 April), after that there will be no transcribing done in the field.</p> <p style="text-align: right;">for Willard C. CURTIS</p> <p><i>FILE</i> <i>LIFEAT Prod.</i></p> | | | |
| <u>Attachment:</u> 1. As Stated (HEREWITH) | | | |
| <u>Distribution:</u> 2 - EED w/att h/w <input checked="" type="checkbox"/> - WHD w/o/att 2 - Files | | | |
| 14 13 12 11 10 9 8 7 | | | |
| CROSS REFERENCE TO | DISPATCH SYMBOL AND NUMBER HMMA-25814 | DATE 8 April 1965 | |
| | CLASSIFICATION SECRET | MURS FILE NUMBER SG-2-2/9 | |

CONFIDENTIAL

(COLLECTOR/INTELLIGENCE, RECLASSIFY ACCORDING TO DATA ADDED BELOW)

| CIA REQUEST FOR EVALUATION BY Department of State | | EVALUATING AGENCY | |
|--|--|---|--|
| DATE OF DISTRIB. | February 1963 | DISSEM. NUMBER | C3-3/538,352 |
| CHIEF COUNTRY | Yugoslavia/Mexico | FIELD NUMBER | 12 March 63 MEXICO CITY PLEASE RETURN EVALUATION |
| SUBJECT | Yugoslav Commercial Activities in Mexico | | |
| EX RAY OF DDC/CE - ROOM 617B | | | |
| <p>EVALUATOR: Please complete this evaluation within 10 days of receipt of request. Need for completion within this time is priority standard. Indicate choices by "x." If item marked is printed in italics, please explain under "Evaluator's Comments." Normally, put one X in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further notes on use of this form, see reverse.</p> | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | |
| <input type="checkbox"/> 1. Major <input checked="" type="checkbox"/> 2. Moderate <input type="checkbox"/> 3. Little <input type="checkbox"/> 4. No | | IMPORTANCE IN RELATION TO OUR NEEDS: <i>We would appreciate your comments evaluating this report.</i> | |
| INFORMATION IN THIS REPORT: | | | |
| B CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT: <input type="checkbox"/> 1. Significantly. <input type="checkbox"/> 2. Substantially. <input checked="" type="checkbox"/> 3. Moderately. <input type="checkbox"/> 4. Negligibly. | | | |
| C ACCURACY: <input type="checkbox"/> 1. Substantially true. <input checked="" type="checkbox"/> 2. Credible. <input type="checkbox"/> 3. Doubtful. <input type="checkbox"/> 4. False. <input type="checkbox"/> 5. Cannot be judged. See D. | | EVALUATOR'S COMMENTS AND FOLLOW-UP QUESTIONS | |
| D RELATION TO OTHER INFORMATION: <input checked="" type="checkbox"/> 1. Useful for confirmation. <input type="checkbox"/> 2. Useful for new information. <input type="checkbox"/> 3. Sufficiently known. <input type="checkbox"/> 4. At present we lack other information to judge accuracy or usefulness. <input type="checkbox"/> 5. Conflicts with previous information. <input type="checkbox"/> 6. Appears to be fabrication. | | <p>As a status re crt, document is of moderate value. Generally negative progress of Yugo attempts to establish a commercial foothold in Mexico not in itself of great interest to this office, at this time, but would increase in interest in direct relation to information on decision of Belgrade to grant a loan to Mexican govt.</p> | |
| E USEFULNESS WOULD HAVE BEEN GREATER WITH: <input type="checkbox"/> 1. More detail. <input type="checkbox"/> 2. Less detail, more summary. <input type="checkbox"/> 3. Less fragmentary approach. <input type="checkbox"/> 4. Better organization. <input type="checkbox"/> 5. Better observation or better exploitation of source, or both. <input type="checkbox"/> 6. (Stated in comment.) <input checked="" type="checkbox"/> 7. No defect affecting usefulness. | | | |
| OUR COLLECTION NEEDS | | | |
| F OTHER REPORTING MEETS: <input checked="" type="checkbox"/> 1. Our important needs. <input type="checkbox"/> 2. Our minimum needs. <input type="checkbox"/> 3. Most of our minimum needs. <input type="checkbox"/> 4. Few or none of our needs. | | | |
| G ONLY IF YOUR REQUIREMENT IS CITED, I REPORT SATISFIES IT: <input type="checkbox"/> 1. Fully, requirement can be closed. <input type="checkbox"/> 2. Partially, portion of requirement may be closed. <input type="checkbox"/> 3. Partially, but need continues. <input type="checkbox"/> 4. Negligibly. | | | |
| H (IF SUBJECT IS IMPORTANT TO YOU, OTHER REPORTING DOES NOT MEET MINIMUM NEEDS, AND YOU HAVE FILED NO REQUIREMENT) <input type="checkbox"/> 1. We will present a requirement soon. <input type="checkbox"/> 2. Our need does not warrant a requirement for CS reporting. | | | |
| EVALUATOR | NAME (Please print) P. Adler | COMPONENT | PHONE x 3503 |
| | DATE REQUEST RECEIVED. Mar 1 | DATE EVALUATION FORWARDED | Mar 6 |
| TM 39 | 10-58, 3-60 EDITIONS MAY BE USED. | CONFIDENTIAL | |

CONFIDENTIAL
(COLLECTOR/EVALUATOR)
RECLASSIFY ACCORDING TO DATA INDEXED BELOW)

| CIA REQUEST FOR EVALUATION BY State Department | | EVALUATING AGENCY | | |
|--|--|--|--|--|
| DATE OF DISTRIB. 27 January 1961 | | DISSEM. NUMBER CS-3/463,061 | Lefevre 10 Apr. 61 | |
| Chief Country Mexico/Cuba | | FIELD NUMBER HNM-5400 | | |
| Subject Mexican Technicians Going to Work in Cuba | | | | |
| EVALUATOR: Please complete this evaluation within 60 days of receipt of request. Need for completion within this time is <u>priority standard</u> . Indicate choices by <u>xx</u> . If item marked is printed in italics, please explain under "Evaluator's Comments." Normally, put one X in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further notes on use of this form, see reverse. | | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | | |
| A | <input checked="" type="checkbox"/> 1. MAJOR. <input checked="" type="checkbox"/> 2. MODERATE <input type="checkbox"/> 3. LITTLE <input type="checkbox"/> 4. NO | } IMPORTANCE IN RELATION TO OUR NEEDS. | EVALUATOR'S COMMENTS AND FOLLOW-UP QUESTIONS <i>This report would have been of greater value if it had included some comment on the political orientation of the technicians (if any) and whether they were being sent by the Mexican Government or were hired on a purely personal basis.</i> | |
| B INFORMATION IN THIS REPORT: | | | | |
| B CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT: | <input type="checkbox"/> 1. SIGNIFICANTLY <input type="checkbox"/> 2. SUBSTANTIABLY <input checked="" type="checkbox"/> 3. MODERATELY <input type="checkbox"/> 4. NEGLIGIBLY | | | |
| C ACCURACY: | <input type="checkbox"/> 1. SUBSTANTIALLY TRUE <input checked="" type="checkbox"/> 2. CREDIBLE <input type="checkbox"/> 3. Doubtful <input type="checkbox"/> 4. False <input type="checkbox"/> 5. CANNOT BE JUDGED. SEE D. | | | |
| D RELATION TO OTHER INFORMATION: | <input type="checkbox"/> 1. USEFUL FOR CONFIRMATION <input checked="" type="checkbox"/> 2. USEFUL FOR NEW INFORMATION <input type="checkbox"/> 3. Sufficiently known <input type="checkbox"/> 4. AT PRESENT WE LACK OTHER INFORMATION TO JUDGE ACCURACY OR USEFULNESS <input type="checkbox"/> 5. Conflicts with previous information <input type="checkbox"/> 6. Appears to be fabrication | | | |
| E USEFULNESS WOULD HAVE BEEN GREATER WITH: | <input type="checkbox"/> 1. More detail <input type="checkbox"/> 2. Less detail, more summary <input type="checkbox"/> 3. Less fragmentary approach <input type="checkbox"/> 4. Better organization <input type="checkbox"/> 5. Better observation or better exploitation of source, or both. <input checked="" type="checkbox"/> 6. (STATED IN COMMENT) <input type="checkbox"/> 7. NO DEFECT AFFECTING USEFULNESS. | | | |
| OUR COLLECTION NEEDS | | | | |
| F OTHER REPORTING NEEDS: | <input type="checkbox"/> 1. OUR IMPORTANT NEEDS. <input type="checkbox"/> 2. OUR MINIMUM NEEDS. <input type="checkbox"/> 3. MOST OF OUR MINIMUM NEEDS. <input type="checkbox"/> 4. FEW OR NONE OF OUR NEEDS. | | | |
| G (ONLY IF YOUR REQUIREMENT IS CITED.) REPORT SATISFIES IT: | <input type="checkbox"/> 1. FULLY. REQUIREMENT CAN BE CLOSED. <input type="checkbox"/> 2. PARTIALLY. PORTION OF REQUIREMENT MAY BE CLOSED. <input type="checkbox"/> 3. PARTIALLY. BUT NEED CONTINUES. <input type="checkbox"/> 4. NEGLIGIBLY | | | |
| H (IF SUBJECT IS IMPORTANT TO YOU, OTHER REPORTING DOES NOT MEET MINIMUM NEEDS, AND YOU HAVE FILED NO REQUIREMENT.) | <input type="checkbox"/> 1. WE WILL PRESENT A REQUIREMENT SOON. <input type="checkbox"/> 2. OUR NEED DOES NOT WARRANT A REQUIREMENT FOR CS REPORTING. | | | |
| EVALUATOR | NAME (Please print) Lawrence S. Eagleburger | COMPONENT | PHONE | |
| | DATE REQUEST RECEIVED March 17, 1961 | DATE EVALUATION FORWARDED March 22, 1961. | 182-2097 | |

CONFIDENTIAL

(COLLECTOR/EVA ATC RECLASSIFY ACCORDING TO A (ED BELOW))

LIEFAT
TICKET
11/16/60

| | | | |
|---|---------------------------|--------------------------------------|----------------------|
| CIA REQUEST FOR EVALUATION BY | | Department of State | EVALUATING AGENCY |
| DATE OF DISTRIB. | 2 November 1960 | DISSEM. NUMBER | CS-3,254,933 RDI |
| Chief Country | Mexico/Nicaragua | FIELD NUMBER | HMM-5264 26 APR 1960 |
| Subject Nicaraguan Revolutionary Activities in Mexico | | | |
| <p>EVALUATOR: Please complete this evaluation within 60 days of receipt of request. Need for completion within this time is EXTRA/standard. Indicate choices by "X." If item marked is printed in italics, please explain under "Evaluator's Comments." Normally, put one X in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further NOTES on use of this form, see reverse.</p> | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | |
| <input type="checkbox"/> 1. Major <input checked="" type="checkbox"/> 2. Moderate <input type="checkbox"/> 3. Little <input type="checkbox"/> 4. No | | IMPORTANCE IN RELATION TO OUR NEEDS. | |
| INFORMATION IN THIS REPORT: | | | |
| B CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT: | | | |
| 1. Significantly 2. Substantially <input checked="" type="checkbox"/> 3. Moderately <input type="checkbox"/> 4. Negligibly | | | |
| C ACCURACY: | | | |
| 1. Substantially True <input checked="" type="checkbox"/> 2. Credible <input type="checkbox"/> 3. Doubtful <input type="checkbox"/> 4. False <input type="checkbox"/> 5. Cannot be judged. See D. | | | |
| D RELATION TO OTHER INFORMATION: | | | |
| 1. Useful for confirmation <input checked="" type="checkbox"/> 2. Useful for new information <input type="checkbox"/> 3. Sufficiently known <input type="checkbox"/> 4. At present we lack other information to judge accuracy or usefulness <input type="checkbox"/> 5. Conflicts with previous information <input type="checkbox"/> 6. Appears to be fabrication | | | |
| E USEFULNESS WOULD HAVE BEEN GREATER WITH: | | | |
| 1. More detail 2. Less detail, more summary 3. Less fragmentary approach 4. Better organization <input type="checkbox"/> 5. Better observation or better exploitation of source, or both. <input type="checkbox"/> 6. (STATED IN COMMENTS) <input type="checkbox"/> 7. NO DEFECT AFFECTING USEFULNESS. | | | |
| OUR COLLECTION NEEDS | | | |
| F OTHER REPORTING MEETS: | | | |
| 1. Our important needs. 2. Our minimum needs. 3. Most of our minimum needs. 4. Few or none of our needs. | | | |
| G (ONLY IF YOUR REQUIREMENT IS CITED.) REPORT SATISFIES IT: | | | |
| 1. Fully, requirement can be closed. 2. Partially. Portion of requirement may be closed. 3. Partially, but need continues. 4. Negligibly | | | |
| H (IF SUBJECT IS IMPORTANT TO YOU, OTHER REPORTING DOES NOT MEET MINIMUM NEEDS, AND YOU HAVE FILED NO REQUIREMENT) | | | |
| 1. We will present a requirement soon. 2. Our need does not warrant a requirement for CS reporting. | | | |
| EVALUATOR | NAME (Please print) | | COMPONENT |
| | RT Morrison | | INR/RAR-P |
| | DATE REQUEST RECEIVED | PHONE | |
| | Nov 15/60 | 3327 | |
| | DATE EVALUATION FORWARDED | | |
| | Nov 16/60 | | |

CONFIDENTIAL

(COLLECTOR/EVALUATOR: RECLASSIFY ACCORDING TO DATA ADDED BELOW)

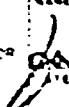
See back of front page

| CIA REQUEST FOR EVALUATION BY | | Department of State | EVALUATING AGENCY | |
|---|---|---|---------------------------|-------|
| DATE OF DISTRIB. | 1 November 1960 | DISSEM. NUMBER | CS-3/454,903 | |
| Chief Country | Mexico/Cuba | FIELD NUMBER | HMM-5245 | |
| Subject: Propaganda Activities of the Cuban Embassy in Mexico | | | | |
| <p>EVALUATOR: Please complete this evaluation within 50 days of receipt of request. Need for completion within this time is XXXXX/standard. Indicate choices by "X." If item marked is printed in italics, please explain under "Evaluator's Comments." Normally, put one X in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further NOTES on use of this form, see reverse.</p> | | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | | |
| A | <input checked="" type="checkbox"/> 1. Major <input checked="" type="checkbox"/> 2. MODERATE <input type="checkbox"/> 3. LITTLE <input type="checkbox"/> 4. NO | <small>IMPORTANCE IN RELATION TO OUR NEEDS.</small> | | |
| INFORMATION IN THIS REPORT: | | | | |
| B | CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT: | | | |
| | <input type="checkbox"/> 1. SIGNIFICANTLY <input type="checkbox"/> 2. SUBSTANTIALLY <input checked="" type="checkbox"/> 3. MODERATELY <input type="checkbox"/> 4. NEGLIGIBLY | <small>EVALUATOR'S COMMENTS AND FOLLOW-UP QUESTIONS</small> | | |
| C | ACCURACY: | | | |
| | <input checked="" type="checkbox"/> 1. SUBSTANTIALLY TRUE <input checked="" type="checkbox"/> 2. CREDIBLE <input type="checkbox"/> 3. Doubtful <input type="checkbox"/> 4. False <input type="checkbox"/> 5. CANNOT BE JUDGED. SEE D. | | | |
| D | RELATION TO OTHER INFORMATION: | | | |
| | <input type="checkbox"/> 1. USEFUL FOR CONFIRMATION <input checked="" type="checkbox"/> 2. USEFUL FOR NEW INFORMATION <input type="checkbox"/> 3. Sufficiently known <small>4. AT PRESENT WE LACK OTHER INFORMATION TO JUDGE ACCURACY OR USEFULNESS</small> <small>5. Conflicts with previous information</small> <small>6. Appears to be fabrication</small> | | | |
| E | USEFULNESS WOULD HAVE BEEN GREATER WITH: | | | |
| | <input type="checkbox"/> 1. More detail <input type="checkbox"/> 2. Less detail, more summary <input type="checkbox"/> 3. Less fragmentary approach <input type="checkbox"/> 4. Better organization <small>5. Better observation or better exploitation of source, or both.</small> <input type="checkbox"/> 6. (STATED IN COMMENT) <input type="checkbox"/> 7. NO DEFECT AFFECTING USEFULNESS. | | | |
| OUR COLLECTION NEEDS | | | | |
| F | OTHER REPORTING MEETS: | | | |
| | <input type="checkbox"/> 1. OUR IMPORTANT NEEDS. <input type="checkbox"/> 2. OUR MINIMUM NEEDS. <input type="checkbox"/> 3. MOST OF OUR MINIMUM NEEDS. <input type="checkbox"/> 4. FEW OR NONE OF OUR NEEDS. | | | |
| G | (ONLY IF YOUR REQUIREMENT IS CITED.) REPORT SATISFIES IT: | | | |
| | <input type="checkbox"/> 1. FULLY. REQUIREMENT CAN BE CLOSED. <input type="checkbox"/> 2. Partially. Portion of requirement may be closed. <input type="checkbox"/> 3. PARTIALLY. BUT NEED CONTINUES. <input type="checkbox"/> 4. NEGLIGIBLY | | | |
| H | (IF SUBJECT IS IMPORTANT TO YOU, OTHER REPEATING DOES NOT MEET MINIMUM NEEDS, AND YOU HAVE FILED NO REQUIREMENTS) | | | |
| | <input type="checkbox"/> 1. WE WILL PRESENT A REQUIREMENT SOON. <input type="checkbox"/> 2. OUR NEED DOES NOT WARRANT A REQUIREMENT FOR CS REPORTING. | | | |
| EVALUATOR | NAME (Please print) | | COMPONENT | PHONE |
| | RT Merrison | | IWR RRP | 3327 |
| | DATE REQUEST RECEIVED | | DATE EVALUATION FORWARDED | |
| | Nov 18 1960 | | Nov 18 1960 | |

CONFIDENTIAL

(CLASSIFIER/EVALUATOR: RECLASSIFY ACCORDING TO THE APPENDIXES BELOW)

1/FEAT
Prod folder

| CIA REQUEST FOR EVALUATION BY | | OSI | EVALUATING AGENCY |
|--|---------------------|---|-------------------|
| DATE OF REQUEST: | 26 September 1960 | DISSEM. NUMBER | C8 3/451,014 |
| Chief Country | Mexico/Soviet Union | FIELD NUMBER | EM4 5159 |
| Subject Mexican Government Purchase of Soviet Radioisotopes | | | |
| <p>EVALUATOR: Please complete this evaluation within 10 days of receipt of request. Hold for completion within this time if xxxxxx standard. Indicate choices by "x." If item marked is printed in italics, please explain under "Evaluator's Comments." Normally, put one X in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further notes on use of this form, see reverse.</p> | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | |
| <input checked="" type="checkbox"/> 1. MAJOR <input type="checkbox"/> 2. MODERATE A3 <input checked="" type="checkbox"/> 3. LITTLE <input type="checkbox"/> 4. NO | | <small>IMPORTANCE IN RELATION TO OUR NEEDS.</small> | |
| INFORMATION IN THIS REPORT: | | | |
| CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT: | | | |
| <input type="checkbox"/> 1. SIGNIFICANTLY <input type="checkbox"/> 2. SUBSTANTIALLY <input type="checkbox"/> 3. MODERATELY B6 <input type="checkbox"/> 4. NEGLECTIBLY | | EVALUATOR'S COMMENTS AND FOLLOW-UP QUESTIONS | |
| ACCURACY: | | | |
| <input type="checkbox"/> 1. SUBSTANTIALLY TRUE C2 <input checked="" type="checkbox"/> 2. CREDIBLE <input type="checkbox"/> 3. Doubtful <input type="checkbox"/> 4. False <input type="checkbox"/> 5. CANNOT BE JUDGED. SEE D. | | | |
| RELATION TO OTHER INFORMATION: | | | |
| <input type="checkbox"/> 1. USEFUL FOR CONFIRMATION <input type="checkbox"/> 2. USEFUL FOR NEW INFORMATION D3 <input type="checkbox"/> 3. Sufficiently known <input type="checkbox"/> 4. AT PRESENT WE LACK OTHER INFORMATION TO JUDGE ACCURACY OR USEFULNESS <input type="checkbox"/> 5. Conflicts with previous information <input type="checkbox"/> 6. Appears to be fabrication | | | |
| USEFULNESS WOULD HAVE BEEN GREATER IF THIS: | | | |
| <input type="checkbox"/> 1. More detail <input type="checkbox"/> 2. Less detail, more summary <input type="checkbox"/> 3. Less fragmentary approach <input type="checkbox"/> 4. Better organization <input type="checkbox"/> 5. Better observation or better exploitation of source, or both. <input type="checkbox"/> 6. STATED IN COMMENT | | | |
| E7 <input type="checkbox"/> 7. NO EFFECT AFFECTING USEFULNESS. | | | |
| OUR COLLECTION NEEDS: | | | |
| OTHER REPORTING NEEDS: | | | |
| F1 <input type="checkbox"/> 1. OUR IMPORTANT NEEDS. <input type="checkbox"/> 2. OUR MINIMUM NEEDS. <input type="checkbox"/> 3. MOST OF OUR MINIMUM NEEDS. <input type="checkbox"/> 4. FEW OR NONE OF OUR NEEDS. | | ONLY IF YOUR REQUIREMENT IN CITER. F REPORT SATISFIES IT: | |
| <input type="checkbox"/> 1. FULLY, REQUIREMENT CAN BE CLOSED. <input type="checkbox"/> 2. PARTIALLY. Portion of requirement may be closed. <input type="checkbox"/> 3. PARTIALLY. BUT NEED CONTINUES. <input type="checkbox"/> 4. NEGLECTIBLY | | | |
| <small>IF SUBJECT IS IMPORTANT TO YOU, OTHER REPORTING DOES NOT MEET MINIMUM NEEDS, AND YOU HAVE FILED NO REQUIREMENTS:</small> | | | |
| G2 <input type="checkbox"/> 1. WE WILL PRESENT A REQUIREMENT SOON <input type="checkbox"/> 2. OUR NEED DOES NOT WARRANT A REQUIREMENT AND WE DO NOT REPORT. | | Coordinated with LSD/SI | |
| <small>EVALUATOR</small>  | | COMPONENT | PHONE |
| | | <i>for</i> | OSI/NED |
| | | DATE EVALUATION FORWARDED | <i>3955</i> |
| <small>DATE REQUEST RECEIVED</small>  | | | |
| <small>FORM 5400-39 5-68 GPO: 1968 O-500-1000</small> | | | |

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(COLLECTOR/EVALUATOR: DECLASSIFY ACCORDING TO FORMS ADDED BELOW)

LIFEAT
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|---|-----------------|---|--------------------------------------|
| CIA REQUEST FOR EVALUATION BY | | United States Information Agency | |
| EVALUATING AGENCY | | | |
| DATE OF DISTRIB. | 1 November 1960 | DISSEM. NUMBER | CS-3/454,903 |
| Chief Country | Mexico/Cuba | FIELD NUMBER | HQ4-5245 |
| Subject: Propaganda Activities of the Cuban Embassy in Mexico | | | |
| <p>EVALUATOR: Please complete this evaluation within 20 days of receipt of request. Need for completion within this time is XXXX/standard. Indicate choices by "X." If item marked is printed in italics, please explain under "Evaluator's Comments." Normally, put one X in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further NOTES on use of this form, see reverse.</p> | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | |
| <input checked="" type="checkbox"/> 1. Major <input type="checkbox"/> 2. MODERATE <input type="checkbox"/> 3. LITTLE <input type="checkbox"/> 4. NO | | IMPORTANCE IN RELATION TO OUR NEEDS. | |
| | | | |
| INFORMATION IN THIS REPORT: | | | |
| B CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT: | | | |
| <input type="checkbox"/> 1. SIGNIFICANTLY <input checked="" type="checkbox"/> X 2. SUBSTANTIALLY <input type="checkbox"/> 3. MODERATELY <input type="checkbox"/> 4. NEGLIGIBLY | | | |
| C ACCURACY: | | | |
| <input type="checkbox"/> 1. SUBSTANTIALLY TRUE <input type="checkbox"/> 2. CREDIBLE <input type="checkbox"/> 3. Doubtful <input type="checkbox"/> 4. False <input checked="" type="checkbox"/> X 5. CANNOT BE JUDGED. SEE D. | | | |
| D RELATION TO OTHER INFORMATION: | | | |
| <input type="checkbox"/> 1. USEFUL FOR CONFIRMATION <input checked="" type="checkbox"/> X 2. USEFUL FOR NEW INFORMATION <input type="checkbox"/> 3. "SUFFICIENTLY" KNOWN <input type="checkbox"/> 4. AT PRESENT NO OTHER INFORMATION TO JUDGE ACCURACY OR USEFULNESS <input type="checkbox"/> 5. Conflicts with previous information <input type="checkbox"/> 6. Appears to be fabrication | | | |
| E USEFULNESS WOULD HAVE BEEN GREATER WITH: | | | |
| <input type="checkbox"/> 1. More detail <input type="checkbox"/> 2. Less detail, more summary <input type="checkbox"/> 3. Less fragmentary approach <input type="checkbox"/> 4. Better organization <input type="checkbox"/> 5. Better observation or better exploitation of source, or both. <input type="checkbox"/> 6. STATED IN COMMENTS <input checked="" type="checkbox"/> X 7. NO DEFECT AFFECTING USEFULNESS. | | | |
| F OUR COLLECTION NEEDS | | | |
| G OTHER REPORTING NEEDS: | | | |
| <input checked="" type="checkbox"/> X 1. OUR IMPORTANT NEEDS. <input type="checkbox"/> 2. OUR MINIMUM NEEDS. <input type="checkbox"/> 3. MOST OF OUR MINIMUM NEEDS. <input type="checkbox"/> 4. FEW OR NONE OF OUR NEEDS. | | | |
| H FULLY IF YOUR REQUIREMENT IS CITED.) REPORT SATISFIES IT: | | | |
| <input type="checkbox"/> 1. FULLY. REQUIREMENT CAN BE CLOSED. <input type="checkbox"/> 2. PARTIALLY. PORTION OF REQUIREMENT MAY BE CLOSED. <input type="checkbox"/> 3. PARTIALLY. BUT NEED CONTINUES. <input type="checkbox"/> 4. NEGLIGIBLY | | | |
| I IF SUBJECT IS IMPORTANT TO YOU, OTHER REPORTING DOES NOT MEET MINIMUM NEEDS, AND YOU HAVE FILED NO REQUIREMENT: | | | |
| <input type="checkbox"/> 1. WE WILL PRESENT A REQUIREMENT SOON. <input type="checkbox"/> 2. OUR NEED DOES NOT WARRANT A REQUIREMENT FOR CS REPORTING. | | | |
| EVALUATOR | | NAME (Please Print) | COMPONENT |
| | | Flora M. Roth | Office of Research and Analysis, USA |
| DATE REQUEST RECEIVED | | PHONE | |
| November 8, 1960 | | 152-5475 | |
| DATE EVALUATION FORWARDED | | November 14, 1960 | |

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(CONTINUED/EVALUATOR: RECLASSIFY ACCORDING TO DATA ADDED BELOW)

LIFEAT
Pres. Folio #

CIA REQUEST FOR EVALUATION BY _____ Department of State _____

EVALUATING AGENCY

| | | | |
|---------------------|----------------|-------------------|--------------|
| DATE OF DISTRIB. | 3 October 1960 | DISSEM. NUMBER | CS-3/L51,671 |
| COUNTRY | Marina/Poland | FIELD NUMBER | HGM-5126 |

Subject Projected Arrival in Mexico of Polish Travel Officials

EVALUATOR: Please complete this evaluation within 10 days of receipt of request. Need for completion within this time is ~~MAXIMUM~~ standard. Indicate choices by "x." If item marked is printed in italics, please explain under "Evaluator's Comments." Normally, put one X in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further notes on use of this form, see reverse.

| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | | |
|-------------------------------|---|--|-----------|-------|
| A | <input checked="" type="checkbox"/> 1. MAJOR <input checked="" type="checkbox"/> 2. MODERATE <input type="checkbox"/> 3. LITTLE <input type="checkbox"/> 4. NO | } IMPORTANCE IN RELATION TO OUR NEEDS. | | |
| INFORMATION IN THIS REPORT: | | | | |
| B | CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT: | | | |
| | <input type="checkbox"/> 1. SIGNIFICANTLY <input type="checkbox"/> 2. SUBSTANTIALLY <input checked="" type="checkbox"/> 3. MODERATELY <input type="checkbox"/> 4. NEGIGLIGIBLY | * Is this information of sufficient use or value to warrant dissemination? | | |
| C | ACCURACY: | | | |
| | <input type="checkbox"/> 1. SUBSTANTIALLY TRUE <input type="checkbox"/> 2. CREDIBLE <input type="checkbox"/> 3. Doubtful <input type="checkbox"/> 4. False <input type="checkbox"/> 5. Cannot be judged. SEE D. | EVALUATOR'S COMMENTS AND FOLLOW-UP QUESTIONS | | |
| D | RELATION TO OTHER INFORMATION: | | | |
| | <input checked="" type="checkbox"/> 1. USEFUL FOR CONFIRMATION <input checked="" type="checkbox"/> 2. USEFUL FOR NEW INFORMATION <input type="checkbox"/> 3. Sufficiently accurate <input type="checkbox"/> 4. AT PRESENT WE LACK OTHER INFORMATION TO JUDGE ACCURACY OR USEFULNESS <input type="checkbox"/> 5. Conflicts with previous information <input type="checkbox"/> 6. Appears to be fabrication | Information of this nature is of value to PRR, for it provides new data and/or corroboration of information from other sources on Latin American - Bloc contacts. | | |
| E | USEFULNESS WOULD HAVE BEEN GREATER IF THE: | | | |
| | <input checked="" type="checkbox"/> 1. More detail <input type="checkbox"/> 2. Less detail. More summary <input type="checkbox"/> 3. Less fragmentary approach <input type="checkbox"/> 4. Better organization <input type="checkbox"/> 5. Better observation or better expla- nation of source, or both <input type="checkbox"/> 6. STATED IN CONTEXT <input type="checkbox"/> 7. NO EFFECT AFFECTING USEFULNESS. | PRR has continuing interest in receipt of reports of this nature. | | |
| OUR COLLECTION NEEDS | | | | |
| F | OTHER REPORTING NEEDS: | | | |
| | <input type="checkbox"/> 1. OUR IMPORTANT NEEDS. <input type="checkbox"/> 2. OUR MINIMUM NEEDS. <input type="checkbox"/> 3. MOST OF OUR MIN. NEEDS. <input type="checkbox"/> 4. FEW OR NONE OF OUR NEEDS. | 57 | | |
| G | ONLY IF YOUR REQUIREMENT IS CITED, REPORT SATISFIES IT: | | | |
| | <input type="checkbox"/> 1. FULLY. REQUIREMENT CAN BE CLOSED. <input type="checkbox"/> 2. PARTIALLY. PORTION OF REQUIREMENT MAY BE CLOSED. <input type="checkbox"/> 3. PARTIALLY, BUT NOT CONTINUED. <input type="checkbox"/> 4. NEGIGLIGIBLY | 57 | | |
| H | IF SUBJECT IS IMPORTANT TO YOU, OTHER RE- PORTING DOES NOT MEET MINIMUM NEEDS, AND YOU HAVE FILED NO REQUIREMENTS: | | | |
| | <input type="checkbox"/> 1. WE WILL PRIORITY A REQUIREMENT SOON. <input type="checkbox"/> 2. OUR NEED DOES NOT WARRANT A REQUIRE- MENT FOR US REPORTING. | 57 | | |
| EVALUATOR | | NAME (PLEASE PRINT) | COMPONENT | PHONE |
| | | John T. Johnson | INT/RHR-6 | 337 |
| DATE REQUEST RECEIVED | | DATE EVALUATION FORWARDED | | |
| | | 10/27/60 | | |

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(COLLECTOR'S STA. / TOR: RECLASSIFY ACCORDING TO A ADDED BELOW)

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| CIA REQUEST FOR EVALUATION BY | | ORR | Reo in OR 56-60 |
|--|---------------------|---|-----------------|
| | | EVALUATING AGENCY | |
| DATE OF DISTRIB. | 26 September 1960 | DISSEM. NUMBER | CS-3/51,014 |
| Chief Country | Mexico/Soviet Union | FIELD NUMBER | HMX-5159 |
| Subject Mexican Government Purchase of Soviet Radioisotopes | | The 27 October 1960 | |
| <p>EVALUATOR: Please complete this evaluation within 60 days of receipt of request. Area for completion within this time is XXXXXX/standard. Indicate choices by "x." If item marked is printed in italics, please explain under "Evaluator's Comments." normally, put one X in each appropriate section. otherwise, please cover each of these aspects in your comments. For further notes on use of this form, see reverse.</p> | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | |
| <input checked="" type="checkbox"/> 1. Major <input checked="" type="checkbox"/> 2. MODERATE <input type="checkbox"/> 3. LITTLE <input type="checkbox"/> 4. NO | | <small>IMPORTANCE IN RELATION TO OUR NEEDS.</small> | |
| INFORMATION IN THIS REPORT: | | | |
| CONTRIBUTES TO OUR ENCLODGE OF THE SUBJECT: | | | |
| <input checked="" type="checkbox"/> 1. SIGNIFICANTLY. <input checked="" type="checkbox"/> 2. SUBSTANTIALLY <input checked="" type="checkbox"/> 3. MODERATELY <input type="checkbox"/> 4. NEGLIGIBLY | | | |
| ACCURACY: | | | |
| <input checked="" type="checkbox"/> 1. SUBSTANTIALLY TRUE <input checked="" type="checkbox"/> 2. CREDIBLE <input type="checkbox"/> 3. Doubtful <input type="checkbox"/> 4. False <input type="checkbox"/> 5. CANNOT BE JUDGED. SEE Q. | | | |
| RELATION TO OTHER INFORMATION: | | | |
| <input type="checkbox"/> 1. USEFUL FOR CONFIRMATION <input type="checkbox"/> 2. USEFUL FOR NEW INFORMATION <input type="checkbox"/> 3. Sufficiently known | | | |
| <small>4. AT PRESENT WE LACK OTHER INFORMATION TO JUDGE ACCURACY OR USEFULNESS</small> <small>5 Conflicts with previous information</small> <small>6 Appears to be fabrication</small> <small>7 USEFULNESS WOULD HAVE BEEN GREATER WITH</small> | | | |
| <small>1. More detail</small> <small>2. Less detail, more summary</small> <small>3. Less fragmentary approach</small> <small>4. Better organization</small> <small>5. Better observation or better exploitation of source, or both.</small> <small>6. STATED IN COMMENT</small> <small>7. NO DEFECT AFFECTING USEFULNESS.</small> | | | |
| IN COLLECTION NEEDS: | | | |
| <input checked="" type="checkbox"/> 1. REPORTING MEETS: <input type="checkbox"/> 2. OUR IMPORTANT NEEDS. <input type="checkbox"/> 3. OUR MINIMUM NEEDS. <input type="checkbox"/> 4. MOST OF OUR MINIMUM NEEDS. <input type="checkbox"/> 5. FEW OR NONE OF OUR NEEDS. | | | |
| <small>1. IF YOUR REQUIREMENT IS CITED, REPORT</small> <small>2. 111</small> | | | |
| <small>FULLY REQUIREMENT CAN BE CLOSED.</small> <small>partially. Portion of requirement may be closed.</small> <small>PARTIALLY, BUT NOT CONTINUED.</small> <small>NEGLIGIBLY</small> | | | |
| <small>NOTICE IS IMPORTANT TO TELL OTHER REQS. DO NOT MEET MINIMUM NEEDS, AND HAVE FILED NO REQUIREMENTS.</small> | | | |
| <small>RE WILL PRESENT A REQUIREMENT SOON.</small> <small>RE NEED DOES NOT WARRANT A REQUIREMENT FOR CS REPORTING.</small> | | | |
| NAME (Please print) | | COMPONENT | PHONE |
| | | OR 56-60/N | x3842 |
| DATE EVALUATION FORWARDED | | | |

CONFIDENTIAL

(COLLECTOR/STAFF R: RECLASSIFY ACCORDING TO DA (ADDED ON FRONT) 17 JUN 1964)

Rec'd. 10-4-64

| CIA REQUEST FOR EVALUATION BY | | OPR | EVALUATING AGENCY | | | | |
|---|---|--------------------------|-------------------|-------|--|--|--|
| ISSUE NUMBER CS-3/439.061 | DATE OF ISSUE 1 June 1960 | FIELD NUMBER HMX-1960 | Lifet | | | | |
| Other Country <u>Mexico/Soviet Union</u> | | Date <u>7 July 1960</u> | <u>19 July 60</u> | | | | |
| Subject <u>New Policy of Soviet Commercial Office in Mexico</u> | | | | | | | |
| <p>EVALUATOR: Please complete this validation within <u>60</u> days of receipt of request. Need for completion within this time is priority/standard. Indicate choices by "X". If item marked is printed in italics, please explain under evaluator's comments. Normally, put one X in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further notes on use of this form, see reverse.</p> | | | | | | | |
| SUBJECT OF THIS REPORT IS OF: | COLLECTOR'S COMMENTS AND QUESTIONS | | | | | | |
| A <table border="1"> <tr><td>1. Major</td></tr> <tr><td>2. Moderate</td></tr> <tr><td>3. Little</td></tr> <tr><td>4. No</td></tr> </table> } IMPORTANCE IN RELAT. TO OUR NEEDS. | 1. Major | 2. Moderate | 3. Little | 4. No | | | |
| 1. Major | | | | | | | |
| 2. Moderate | | | | | | | |
| 3. Little | | | | | | | |
| 4. No | | | | | | | |
| INFORMATION IN THIS REPORT: | | | | | | | |
| B CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT | 1. SIGNIFICANTLY 2. MODERATELY 3. NEGIGIBLY | | | | | | |
| C ACCURACY | 1. SUBSTANTIALLY TRUE <input checked="" type="checkbox"/> 2. CREDIBLE 3. DOUBTFUL 4. FALSE 5. CANNOT BE JUDGED. SEE D. | | | | | | |
| D RELATIVE TO OTHER INFORMATION | 1. USEFUL FOR CONFIRMATION <input checked="" type="checkbox"/> 2. USEFUL FOR NEW INFORMATION 3. Sufficiently known 4. AT PRESENT WE LACK OTHER INFORMATION 5. TO JUDGE ACCURACY OR USEFULNESS 6. Conflicts with previous information 7. Appears to be fabrication | | | | | | |
| E USEFULNESS COULD HAVE BEEN GREATER WITH | 1. More detail 2. Less detail; more summary 3. Less fragmentary approach 4. Better organization 5. Better observation or better exploitation of source, or both 6. STATED IN COMMENT 7. NO DEFECT AFFECTS USEFULNESS | | | | | | |
| REQUIREMENTS | | | | | | | |
| F ONLY IF YOUR REQUIREMENT IS CITIZEN REPORT SATISFIES IT | 1. FULLY, REQUIREMENT CAN BE CLOSED. 2. Partially, part of requirement may be closed. 3. PARTIALLY OR CONTINUES. 4. NEGIGIBLY | | | | | | |
| G DEGREE TO WHICH HER REPORT REPORTING PROVIDED ASSIST IN INFORMATION ON SUBJECT | 1. FULLY 2. SUBSTANTIALLY <input checked="" type="checkbox"/> 3. LITTLE 4. NONE | | | | | | |
| H IF IN D YOU STATED "LITTLE" OR "NONE," AND NO NEW REQUIREMENT | 1. NO NEW REQUIREMENT WITHIN 3 DAYS 2. NO NEW REQUIREMENT, BUT FOR REPORTING | | | | | | |
| I | 1. OUR AGENT DOES NOT WARRANT A REQUIREMENT <input checked="" type="checkbox"/> 2. NOT FOR REPORTING | | | | | | |
| NAME (Please print) | | COMPONENT | PHONE | | | | |
| REQUEST RECEIVED | | ORR/S/TF/SP | SL3L | | | | |
| DATE EVALUATION FORWARDED | | | | | | | |

CONFIDENTIAL

(COLLECTOR/EVALUATOR RECLASSIFY ACCORDING TO DATA (RED ON FRONT) 29 JUN

Received Jun 22, '60
REF ID: A65422

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|---|-----------------|--|-------------------|--|
| CIA REQUEST FOR EVALUATION BY | | CRS | EVALUATING AGENCY | |
| SUBJECT NUMBER | DATE OF REQUEST | | FIELD NUMBER | |
| CS-3/439,528 | 8 June 1960 | | HQX-4963 | |
| Chief Country | | Mexico/Soviet Union | | |
| Subject | | Disagreement between Mexican Businessman and Soviet Commercial Officer over Money Owed for Electronics Purchased by the Mexican Government | | |
| EVALUATOR: Please complete this evaluation within 60 days of receipt of request. See for completion within this time is priority/standard. Indicate choices by "x". If item marked is printed in italics, please explain under "Evaluator's Comments." Normally, put one x in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further notes on use of this form, see reverse. | | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | | |
| <input type="checkbox"/> 1. MAJOR <input type="checkbox"/> 2. MODERATE <input checked="" type="checkbox"/> 3. LITTLE <input type="checkbox"/> 4. NO | | } IMPORTANCE IN RELATION TO OUR NEEDS | | |
| INFORMATION IN THIS REPORT: | | | | |
| B CONTRIBUTED TO OUR KNOWLEDGE OF THE SUBJECT: | | EVALUATOR'S COMMENTS AND FOLLOW-UP QUESTIONS | | |
| <input type="checkbox"/> 1. SIGNIFICANTLY <input checked="" type="checkbox"/> 2. MODERATELY <input type="checkbox"/> 3. NEGLIGIBLY | | | | |
| C ACCURACY: | | | | |
| <input checked="" type="checkbox"/> 1. SUBSTANTIALLY TRUE <input type="checkbox"/> 2. CREDIBLE <input type="checkbox"/> 3. DOUBTFUL <input type="checkbox"/> 4. FALSE <input type="checkbox"/> 5. CANNOT BE JUDGED. SEE D. | | | | |
| D RELATION TO OTHER INFORMATION: | | | | |
| <input checked="" type="checkbox"/> 1. USEFUL FOR CONFIRMATION <input type="checkbox"/> 2. USEFUL FOR NEW INFORMATION <input type="checkbox"/> 3. SUFFICIENTLY KNOWN <input type="checkbox"/> 4. AT PRESENT NO LACK OTHER INFORMATION TO JUDGE ACCURACY OR USEFULNESS <input type="checkbox"/> 5. Conflicts with previous information <input type="checkbox"/> 6. Appears to be fabrication | | | | |
| E USEFULNESS WOULD HAVE BEEN GREATER WITH: | | | | |
| <input type="checkbox"/> 1. More detail <input type="checkbox"/> 2. Less detail, more summary <input type="checkbox"/> 3. Less fragmentary approach <input type="checkbox"/> 4. Better organization <input type="checkbox"/> 5. Better observation or better explanation of course, or both. <input type="checkbox"/> 6. STATED IN COMMENT <input type="checkbox"/> 7. NO EFFECT AFFECTING USEFULNESS. | | | | |
| REQUIREMENTS | | | | |
| F ONLY IF YOUR REQUIREMENT IS CITED, I REPORT SATISFIES IT: | | | | |
| <input type="checkbox"/> 1. FULLY, REQUIREMENT CAN BE CLOSED. <input type="checkbox"/> 2. PARTIALLY, PORTION OF REQUIREMENT CAN BE CLOSED. <input type="checkbox"/> 3. PARTIALLY, BUT NEED CONTINUES. <input type="checkbox"/> 4. NEGLIGIBLY | | | | |
| G REFERENCE TO WHICH OTHER (NON-CIA) REPORTING PROVIDER ASSISTED INFORMATION ON SUBJECT: | | | | |
| <input type="checkbox"/> 1. FULLY <input checked="" type="checkbox"/> 2. SUBSTANTIALLY <input type="checkbox"/> 3. LITTLE <input type="checkbox"/> 4. NONE | | | | |
| H IF IN G YOU MARKED "LITTLE" OR "NONE," AND IF YOU HAVE ONE NEED: | | | | |
| <input type="checkbox"/> 1. OR WILL PRESENT A REQUIREMENT WITHIN 30 DAYS. <input type="checkbox"/> 2. OUR NEED DOES NOT WARRANT A REQUIREMENT FOR CS REPORTING. | | | | |
| NAME (Please print) | | COMPONENT | PHONE | |
| EVALUATOR | | ORR/S/TF/SP | 8036 | |
| DATE | | DATE EVALUATION FORWARDED | | |
| | | 11 July 1960 | | |

(S) CONFIDENTIAL (CLASSIFICATION GUIDE) *Rec'd in ORR*
 (COLLECTOR/EVALUATOR) RECLASSIFY ACCORDING TO DATA FED ON FRONT) 96-171

| CIA REQUEST FOR EVALUATION BY | | ORR | EVALUATING AGENCY |
|---|--|--------------------------------------|--------------------------|
| DISSEM. NUMBER | CS-3/43L, 304 | DATE OF DISSEM. | 18 April 1960 |
| FIELD NUMBER | HGS-1858 | <i>Pleasant Grove</i> | |
| Chief Country | Mexico/Soviet Union | Due 17 May 1960 | |
| Subject | Soviet Plan to Sell Newsprint to Mexican Government Agency | | |
| <p>Evaluator: Please complete this valuation within <u>60</u> days of receipt of request. Need for completion within this time is priority/standard. Indicate choices by "X". If item marked is printed in italics, please explain under "Evaluator's Comments." normally, but one x in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further notes on use of this form, see reverse.</p> | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS. | |
| <input type="checkbox"/> Major <input type="checkbox"/> Moderate <input checked="" type="checkbox"/> Little <input type="checkbox"/> Negligible | | Importance to Relation to Our Needs. | |
| INFORMATION IN THIS REPORT. | | | |
| B CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT: | | | |
| <input type="checkbox"/> Significantly <input checked="" type="checkbox"/> Moderately <input type="checkbox"/> Negligibly | | | |
| C RELIABILITY: | | | |
| <input type="checkbox"/> Substantially True <input type="checkbox"/> Credible <input type="checkbox"/> Doubtful <input type="checkbox"/> False <input checked="" type="checkbox"/> Cannot be judged. See D. | | | |
| D RELAT. TO OTHER INFORMATION: | | | |
| <input type="checkbox"/> Useful for confirmation <input type="checkbox"/> Useful for new information <input type="checkbox"/> Sufficiently known <input checked="" type="checkbox"/> At present we lack other information to judge accuracy or usefulness <input type="checkbox"/> Conflicted with previous information <input type="checkbox"/> Appears to be fabrication | | | |
| E USEFULNESS WOULD HAVE BEEN GREATER IF: | | | |
| <input type="checkbox"/> More detail <input type="checkbox"/> Less detail, more summary <input type="checkbox"/> Less fragmentary approach <input type="checkbox"/> Better organization <input type="checkbox"/> Better observation or better analysis of sources, or both <input type="checkbox"/> Stated in comment <input type="checkbox"/> No effect affecting usefulness. | | | |
| F REQUIREMENTS: | | | |
| ONLY IF YOUR REQUIREMENT IS CITED, IF REPORT SATISFIES IT: | | | |
| <input type="checkbox"/> Fully requirement can be closed <input type="checkbox"/> Partially. Portion of requirement may be closed. <input type="checkbox"/> Partially, but need continues. <input type="checkbox"/> Negligible | | | |
| G RELATED TO WHICH OTHER (INCIDENT) REPORTING PROVIDES ESSENTIAL INFORMATION ON SUBJECT: | | | |
| <input type="checkbox"/> Fully <input type="checkbox"/> Substantially <input type="checkbox"/> Little <input checked="" type="checkbox"/> None | | | |
| H IF IN G YOU CHECKED "LITTLE" OR "NONE," AND IF YOU HAVE FILED NO REQUIREMENT: | | | |
| <input type="checkbox"/> OR WILL PRESENT A REQUIREMENT WITHIN 30 DAYS. <input checked="" type="checkbox"/> OR NEED DOES NOT WARRANT A REQUIREMENT FOR CS REPORTING. | | | |
| NAME (Please print) EVALUATOR DATE REQUEST RECEIVED | | | |
| | | COMPONENT | PHONE |
| | | ORR S/HS | 4285 |
| | | DATE EVALUATION FORWARDED | <i>W.F.</i> 26 May 60 |

SECRET

(See Filled In)

111-72A7

DOCUMENT TRANSFER AND CROSS REFERENCE

| SUBJECT OR DOCUMENT | | DOCUMENT SPECIFICATION | | |
|---|--------------------------|---|-----------------|-------------------|
| Operational/Intelligence | | FILE NO. | 50 | 6 |
| | | DISPATCH OR SOURCE DOC. SYMBOL NO. | 32/A | |
| | | DDA-15007 | | DATE |
| | | 18 May 1960 | | EVALUATION |
| 5. ANALYST | 6. DATE PROCESSED | 10. DISSEMINATED IN | 11. DATE | |
| | | | | |
| DOCUMENT DISPOSITION | | | | |
| 12. CROSS REFERRED TO THIS FILE | | 13. TRANSFERRED TO BY FILE NO. | | |
| PERTINENT INFORMATION | | | | |
| <p>14. THIS REFER TO AN SECRET DOCUMENT FILED IN THE INTELLIGENCE CONTROL SECTION BY TS-17500.....</p> | | | | |
| 18 May 1960 | | | | |
| 15. FILE THIS FORM IN FILE NO  | | | | |

CONFIDENTIAL

(COLLECTOR/EVALUATOR: RECLASSIFY ACCORDING TO DF ADDED ON FRONT)

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|---|------------------------------------|---|---------------------|
| CIA REQUEST FOR EVALUATION BY | | <u>ORR</u> | <u>Reed H March</u> |
| REF ID: # | DATE OF DISTRI. | EVALUATING AGENCY | |
| CS - 3/428,266 | | FIELD NUMBER | HMM-4761 plac |
| Chief Country | Mexico / Soviet Union | | |
| Subject | Soviet Negotiations ship in Cotton | Date 25 March 1960 | |
| <p>EVALUATOR: Please complete this valuation within ____ days of receipt of request. Need for completion within this time is priority/standard. Indicate choices by "X". If item marked is printed in italics, please explain under "Evaluators Comments." Normally, put one X in each appropriate section. Otherwise, please cover each of these aspects in your comments. For further notes on use of this form, see reverse.</p> | | | |
| SUBJECT OF THIS REPORT IS OF: | | COLLECTOR'S COMMENTS AND QUESTIONS | |
| <input checked="" type="checkbox"/> 1. Major <input type="checkbox"/> 2. Moderate <input type="checkbox"/> 3. Little <input type="checkbox"/> 4. No | | <small>IMPORTANCE IN RELATION TO OUR NEEDS.</small> | |
| INFORMATION IN THIS REPORT: | | | |
| CONTRIBUTES TO OUR KNOWLEDGE OF THE SUBJECT: | | | |
| <input checked="" type="checkbox"/> 1. Significantly <input checked="" type="checkbox"/> 2. Moderately <input type="checkbox"/> 3. Negligibly | | | |
| ACCURACY: | | | |
| <input type="checkbox"/> 1. Substantially True <input checked="" type="checkbox"/> 2. Credible <input type="checkbox"/> 3. Doubtful <input type="checkbox"/> 4. False <input type="checkbox"/> 5. Cannot be judged. See Q. | | EVALUATOR'S COMMENTS AND FOLLOW-UP QUESTIONS | |
| RELATION TO OTHER INFORMATION: | | | |
| <input checked="" type="checkbox"/> 1. Useful for confirmation <input checked="" type="checkbox"/> 2. Useful for new information <input type="checkbox"/> 3. Sufficiently known <input type="checkbox"/> 4. At present we lack other information to judge accuracy or usefulness <input type="checkbox"/> 5. Conflicts with previous information <input type="checkbox"/> 6. Appears to be fabrication | | | |
| USEFULNESS COULD HAVE BEEN GREATER WITH: | | | |
| <input type="checkbox"/> 1. More detail <input type="checkbox"/> 2. Less detail, more summary <input type="checkbox"/> 3. Less fragmentary approach <input type="checkbox"/> 4. Better organization <input type="checkbox"/> 5. Better observation or better compilation of source, or both | | | |
| <input checked="" type="checkbox"/> 6. Intertwined comments <input checked="" type="checkbox"/> 7. No effect affecting usefulness. | | | |
| REQUIREMENTS: | | | |
| <small>ONLY IF YOUR REQUIREMENT IS CITED IN REPORT</small> <small>ESTABLISHED IN:</small> | | | |
| <input type="checkbox"/> 1. FULLY - PROBLEM SOLVED OR CLOSED <input type="checkbox"/> 2. PARTIAL - PARTIAL OR REQUIREMENT MAY BE AD. <input type="checkbox"/> 3. PARTIAL - BUT NEED CONTINUES. <input type="checkbox"/> 4. NECESSARY | | | |
| ABILITY TO DETERMINE WHICH REPORTING PROVIDED THE UTILITY INFORMATION ON SUBJECT: | | | |
| <input type="checkbox"/> 1. FULLY <input type="checkbox"/> 2. SUBSTANTIALLY <input type="checkbox"/> 3. LITTLE <input type="checkbox"/> 4. NONE | | | |
| <small>IF IN Q YOU CHECKED "LITTLE" OR "NONE," AND IF YOU HAVE FILED NO REQUIREMENT,</small> | | | |
| <input type="checkbox"/> 1. WE WILL PRESENT A REQUIREMENT WITHIN 30 DAYS. <input type="checkbox"/> 2. OUR NEED DOES NOT WARRANT A REQUIREMENT FOR CS REPORTING. | | | |
| NAME (Please Print) | | COMPONENT | PHONE |
| EVALUATOR | | CRR/M/J/67 | X3552 |
| REQUEST RECEIVED | | DATE EVALUATION FORWARDED | |
| 15 Mar. 1960 | | 29 Mar. 1960 | |

CONFIDENTIAL *Scatter file LIFEAT Box*(COLLECTOR/EVALUATOR: *RECLASSIFY ACCORDING TO DA (STAMPED ON FRONT)*)

| CIA REQUEST FOR EVALUATION BY Department of State | | EVALUATING AGENCY |
|--|------------------|--|
| REF ID: S-3-223-266 | DATE OF REQUEST | FILE NUMBER |
| S-3-223-266 | 19 February 1960 | 100-4762 |
| Chief Country: Mexico/Soviet Union | | |
| Subject: Soviet Negotiations for Mexican Cotton | | |
| <p>INSTRUCTIONS: Please complete this evaluation within 60 days of receipt of request. Need for completion within this time is priority standard. Indicate choices by "X." If item marked is printed in italics, please expand under evaluator's comments. Normally, put one X in each appropriate section, otherwise, please cover each of those aspects in your comments. For further notes on use of this form, see reverse.</p> | | |
| SUBJECT OF THIS REPORT IS OR: | | COLLECTOR'S COMMENTS AND QUESTIONS |
| <input checked="" type="checkbox"/> 1. Policy <input type="checkbox"/> 2. Intelligence <input type="checkbox"/> 3. Strategy <input type="checkbox"/> 4. Tactics | | } important in relation to our needs. Is this information of sufficient use or value to warrant dissemination? Please comment. |
| INFORMATION IN THIS REPORT | | |
| 1. INFORMATION IN THE SUBJECT <input checked="" type="checkbox"/> 1. Discrepancy <input checked="" type="checkbox"/> 2. Ambiguity <input type="checkbox"/> 3. Inconsistency <input type="checkbox"/> 4. Contradiction <input checked="" type="checkbox"/> 5. Inadequate data <input type="checkbox"/> 6. Speculation <input type="checkbox"/> 7. Ambiguity <input type="checkbox"/> 8. Error <input type="checkbox"/> 9. Impossibility of verification <input type="checkbox"/> 10. Contradiction <input type="checkbox"/> 11. Ambiguity <input type="checkbox"/> 12. Inadequate data <input type="checkbox"/> 13. Discrepancy <input type="checkbox"/> 14. Ambiguity <input type="checkbox"/> 15. Inconsistency <input type="checkbox"/> 16. Inadequate data <input type="checkbox"/> 17. Contradiction <input type="checkbox"/> 18. Ambiguity <input type="checkbox"/> 19. Inadequate data <input type="checkbox"/> 20. Discrepancy <input type="checkbox"/> 21. Ambiguity <input type="checkbox"/> 22. 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REF ID: A65630
Soviet
Commercial Activities in Mexico

15 December 1959

CS 3121,511

Line 15

HM 45-40567

15 February 1960

SUBJECT: Soviet Commercial Activities in Mexico

| ACLUPEX | CODE | TYPE OF INFORMATION |
|---------|------|---|
| 1 | 1 | Information on types of machinery offered or sold to Mexico or to Latin America. |
| 2 | 2 | Information on prices in interesting and useful. Price quotations would be more helpful if specifications as well as serial numbers were available. |
| 3 | 3 | Information indicating whether Soviet prices conform to or vary from world market prices. |
| 4 | 4 | Information on points that the Soviets are interested in buying as of and importance, although this is generally available from overt sources. |

What specific aspects of this report are of least? Of value? Please indicate and comment.

Information on the type of machinery offered or sold to Mexico or to Latin America is available from overt sources.

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14-00000

S E C R E T

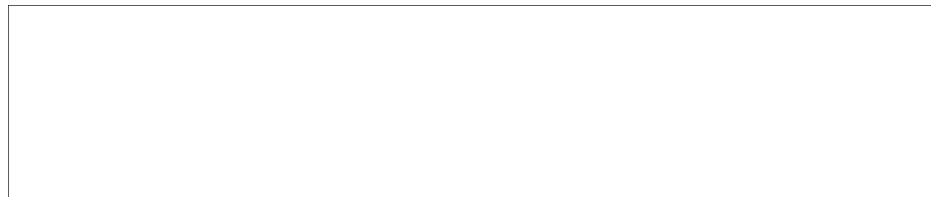
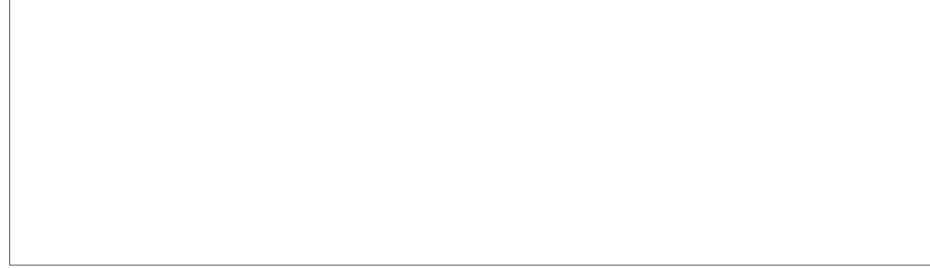
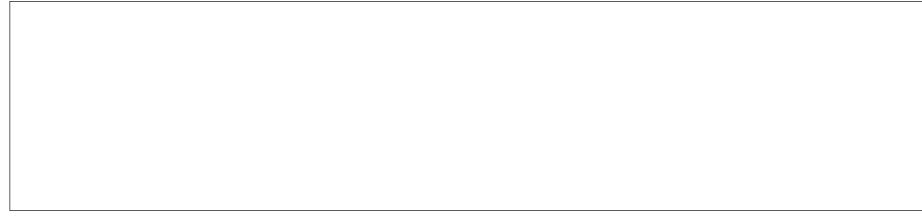
See 1900W 8486, 11 Feb 1960, [redacted] filed C/WHD's
office,

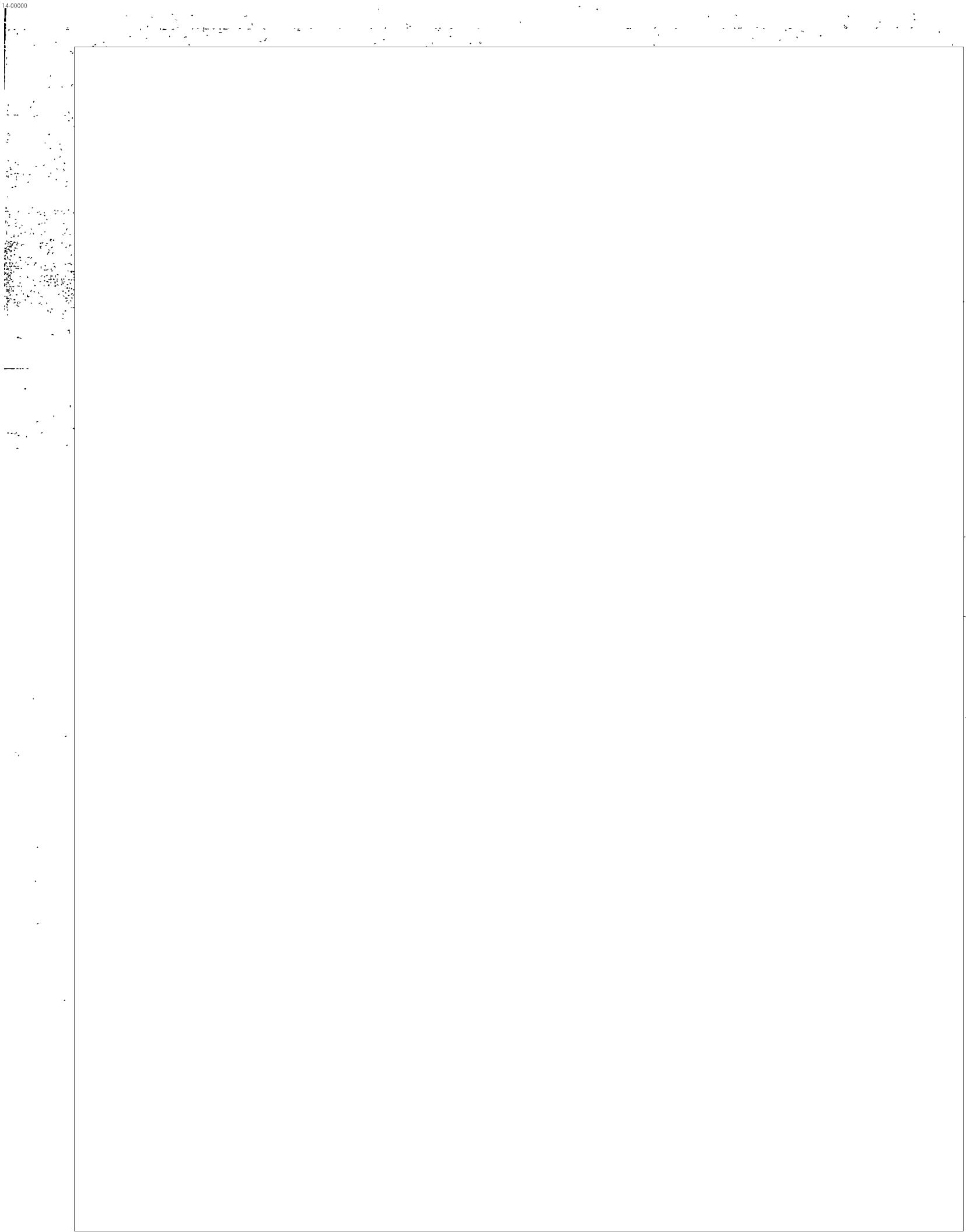
This dispatch was written by M/D in reply to 1900U 14362, 20 Jan 1960 and
should be reviewed before LIFEAT or LIFXIT are submitted for renewal.

I M P O R T A N T

LIFEAT/MHD prod
LIFXIT/epd

S E C R E T







SECRET

From: Mexico, Mexico City

Report No: HW-1831 Local File No:

No. of Pages: 1

No. of Enclosures: 1(for Station files only)

Report Made By: Thomas J. URQUHART

Approved By: Willard C. CURTIS *J.C.*

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2 - Files(1 w/att)

Source Cryptonym: A. LIKAYAK-2

References:

HM-1765, 12 Sep. 1956, p.9

B. LIFEAT/LIMERICK

Source, Operational Data, and Comments:

SUBJECT:

Source obtained the information contained in the attached report from

is being included in this Station's series of LOCIPROVE subjects.

Classification

SECRETFORM NO. 31-58
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